

REVISED 04/2019

The Town of Fenwick Island

800 Coastal Highway, Fenwick Island, DE 19944-4409 302-539-3011 ~ 302-539-1305 fax www.fenwickisland.delaware.gov

RENTAL LICENSE

Residential Property

Applicant's Name:	
Mailing Address:	
Home Telephone # Emerg	ency Telephone #
Email Address:	
RENTAL ADDRESS:	
RENTAL AGENT, ADDRESS & CONTACT PERSON (if applicable):	
Ordinances of the Town of Fenwick Island and that all tax	license privilege, I must comply with all Regulations & kes and assessments due the Town of Fenwick Island upon the 8% tax on Gross Rental Receipts due quarterly on all
_	nployees to seek information and conduct an investigation and the qualifications of the applicant for the requested
I declare, under the penalty of perjury, that the informati	on contained in the application is true and correct.
Applicant's Signature	Date
Make Checks Payable To: Town of Fenwick Island	
Rental License: \$185.00 (Calendar Year) Late Fee: \$100.00	